

**Opening Statement of Chairman Michael C. Burgess, M.D.
Subcommittee on Health
“Supporting Tomorrow’s Health Providers: Examining Workforce
Under the Public Health Service Act”
September 14, 2017**

(As prepared for delivery)

Today’s hearing provides us with an opportunity to begin a discussion on how best to address provider shortages in our country and how to ensure that today’s medical students have the skills and resources to succeed in the 21st century. As a physician, I have always supported programs that improve access to care and enhance the patient experience, and the programs that we are examining today seek to accomplish this goal.

When looking at the data, our mission is clear. The Association of American Medical Colleges estimates that by the year 2030, the United States will have a projected physician shortage ranging from 40,800 providers to as many 104,900 providers.

To address this looming issue, our hearing will focus on four sets of unique programs: the National Health Service Corps, Teaching Health Center Graduate Medical Education, physician workforce programs under Title VII of the Public Health Service Act, and nursing workforce programs under Title VIII of the Public Health Service Act. Each of these programs seeks to increase access to providers in underserved areas and promote the training opportunities for medical students and providers to maintain their skills.

For example, programs like the National Health Service Corps, Area Health Education Centers supported by Title VII grants, and Teaching Health Centers tackle these shortages head on by connecting young providers with underserved communities. These programs are essential to addressing the nation’s provider shortages by connecting providers to underserved communities.

Additionally, Title VII and Title VIII programs support opportunities for continuing medical education for the healthcare workforce, which is not only mandatory for many providers to keep their licenses, but is also essential to

providers as they attempt to keep up with evolving issues and treatments. In an age with modern drugs and a 21st Century Cures Act supporting future innovation, we must ensure our healthcare workforce is ready for these breakthroughs and prepared for future challenges.

This hearing, however, comes at a precarious time for these programs as we seek to reauthorize them and extend their funding. For Title VII and Title VIII which have both expired yet continue to receive appropriations on a year by year basis, a commitment by this Subcommittee to reauthorize these programs would ensure longer-term stability, particularly for future generations of providers.

The National Health Service Corps and the Teaching Health Center Graduate Medical Education program have funding that will expire at the end of the fiscal year, and our Subcommittee is working to ensuring these programs will continue to operate and serve communities in coming years. As is the case with all programs with mandatory funding, finding offsets can be challenging, but I am committed to finding a solution and extending these programs.

I would like to thank each of our witnesses for being here today and providing their insights on the problems ahead. Dr. Adrian Billings, the Chief Medical Office of Preventive Care Health Services, Dr. Neil Calman, the President of the American Association of Teaching Health Centers, Dr. Janice Knebl, from the University of North Texas Health Science Center, and Dr. Juliann Sebastian, the Dean of the College of Nursing at the University of Nebraska Medical Center, are each celebrated providers and experts in their respective fields, and I look forward to hearing from them.

These are not the only programs that support our nation's healthcare workforce, but they are each important and deserve our immediate attention. And as we move beyond the immediacy, I look forward to delving further into this issue and identifying new opportunities to support providers and underserved communities.